## Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

19677710

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |                                   |                               |                              |                  |   | SMALL ENTITY TYPE ( |                        |    | OTHER THAN SMALL ENTITY |                        |
|--|---|---|-----------------------------------|-------------------------------|------------------------------|------------------|---|---------------------|------------------------|----|-------------------------|------------------------|
| TOTAL CLAIMS   |   |   | 7                                 |                               |                              |                  |   | RATE                | FEE                    | [  | RATE                    | FEE                    |
| FOR  |   |   | NUMBER FILED                      |                               | NUMBER EXTRA                 |                  |   | BASIC FEE           | 375.00                 | OR | BASIC FEE               | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | 7 minus 20=                       |                               | * C                          |                  |   | X\$ 9=              |                        | OR | X\$18=                  |                        |
| INDEPENDENT CLAIMS   |   |   |                                   | nus 3 =                       | * 9                          |                  |   | X42=                |                        | OR | X84=                    |                        |
| MU   | LTIPLE DEPEN  | DENT CLAIM PI                             | RESENT                            |                               |                              |                  |   | +140=               |                        | OR | +280=                   |                        |
| * Įf   | the difference  | in column 1 is                            | ess than zero, enter "0" in colum |                               |                              | olumn 2          | 1 | TOTAL               | 375                    | OR | TOTAL                   |                        |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column   |   |   |                                   |                               |                              |                  |   | SMALL E             | ENTITY                 | OR | OTHER<br>SMALL I        |                        |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                   | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY                 | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                             | **                            |                              | =                |   | X\$ 9=              |                        | OR | X\$18=                  |                        |
|  | Independent   | *   | Minus                             | ***                           | F OL AINA                    | =                |   | X42=                |                        | OR | X84=                    |                        |
| L.   | FIRST PRESE   | NTATION OF MI                             | JENPLE DEF                        | ENDEN                         | CLAIM                        |                  |   | +140=               |                        | OR | +280=                   |                        |
|  |   |   |                                   |                               |                              |                  |   |                     |                        | OR | TOTAL<br>ADDIT. FEE     |                        |
|  |   | _ ′                                       | ADDIT. FEE                        | ·····                         |                              | NDD11.1 EE       |   |                     |                        |    |                         |                        |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                   | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                             | **                            |                              | =                |   | X\$ 9=              |                        | OR | X\$18=                  |                        |
|  | Independent   | *<br>NTATION OF MI                        | Minus                             | ***                           | F.CL AIM                     | ]=               |   | X42=                |                        | OR | X84=                    |                        |
| L  | FIRST PRESE   | NIATION OF MI                             | JETIPLE DEF                       | PENDEN                        | CLAIN                        |                  |   | +140=               |                        | OR | +280=                   |                        |
|  |   |   |                                   |                               |                              |                  |   | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE     |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |                                   |                               |                              |                  |   |                     |                        | _  |                         |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                   | PREVI                         | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                             | **                            |                              | =                |   | X\$ 9=              |                        | OR | X\$18=                  |                        |
|  | Independent   | *   | Minus                             |                               |                              | =                |   | X42=                |                        | OR | X84=                    |                        |
| <u>L</u>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                   |                               |                              |                  |   | +140=               |                        | OR | +280=                   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |   |   |                                   |                               |                              |                  |   |                     |                        | ∩R | TOTAL                   |                        |
| **   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                                   |                               |                              |                  |   |                     |                        |    |                         |                        |